ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY Tank Programs Division Underground Storage Tank (UST) Program

ADEQ use only

DOCUMENT SUBMITTAL FORM

| [use as COVER SHEET when submitting the documents listed below] | | | |
|---|-------------|----------------|-----------|
| UST FACILITY INFORMATION: | | | |
| Facility Name | Facility II |) | |
| Street Address | LUST Nu | imber(s) | |
| City Zip Code | County | | |
| PERSON RESPONSIBLE FOR SUBMITTING DOCUMENT: | | RSON CATEGORY | ADEQ ID # |
| Name | □ | UST owner | |
| | | UST operator | |
| Street Address City Zip | Code | UST volunteer | |
| Telephone (daytime) | | Property owner | |
| LUST, RELEASE OR CORRECTIVE ACTION DOCUMENT: (check all that apply; * indicates document requires signed certification statement) * 14 day report (suspected release) | | | |
| □* LUST site classification form □* Site characterization report (SCR) □* Site characterization report (SCR) □* LUST case closure request w/corrective action completion report | | | |
| UST DOCUMENT: Application #: | INFORMAL A | APPEAL: US | = |
| CERTIFICATION STATEMENT OF UST OWNER, OPERATOR OR VOLUNTEER: (for only documents designated above by *) "I hereby certify, under penalty of law, which this submittal and all attachments are, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are penalties for submitting false information, including the possibility of a fine and imprisonment for knowing violations." | | | |
| Signature of UST owner, operator or volunteer Name of UST owner, operator or volunteer (printed) | | Date Title | |